COMBINED DECLARATION AND POWER OF ATTORNEY Attorney Docket No. 07844-475001 Client No. P439

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MULTI-DIMENSIONAL EDGE INTERPOLATION

the specification of which:		
[X] is attached h	nereto.	
[] was filed on		
	r Application No Express Mail No (Application Number not yet known).	
[] was described	and claimed in PCT International Application No	
	t I have reviewed and understand the contents of the above-identified specification, nended by any amendment referred to above.	
	e duty to disclose information which is material to the examination of this application in code of Federal Regulations, Section 1.56(a).	
I hereby appoint a application and to transact correspondence be address	all registered practitioners associated with Customer Number 021876 to prosecute this all business in the Patent and Trademark Office connected therewith, and direct that alesed to:	;
Customer Number 021876		
Direct all telephone calls to HANS R. TROESCH, Reg. No. 36,950 at telephone number (650) 322-5070.		
[X] For Assigned Inventions: I understand that the purpose of making this appointment is to permit prosecution of patent applications for the above-identified invention for the benefit of my assignee, and that this appointment does not create an attorney-client relationship between me and these appointees.		
made on information and be knowledge that willful false	that all statements made herein of my own knowledge are true and that all statements belief are believed to be true; and further that these statements were made with the estatements and the like so made are punishable by fine or imprisonment, or both, under the United States Code and that such willful false statements may jeopardize the validition issued thereon.	
Full name of inventor:	LARS U. BORG	
Inventor's signature	Date: 1/30/2001	
Residence: Citizen of: Post Office Address:	Saratoga, CA Sweden 13845 Pike Road Saratoga, CA 95070	

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